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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/764,050	
	Filing Date	1/23/2004	
	First Named Inventor	Dinah B. Quiachon	
	Art Unit	3731	
	Examiner Name	TBD	
Total Number of Pages in This Submission	5	Attorney Docket Number	ENDOV-67115

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <b>Postcard; Request for Corrected Filing Receipt</b>
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Firm or Individual name	John V. Hanley FULWIDER PATTON LEE & UTECHT, LLP
Signature	<i>John V. Hanley</i>
Date	5/5/2004

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Docket No.: ENDOV-67115  
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of

Inventor: Dinah B. Quiachon, et al.

Serial No. 10/764,050

Filed: January 23, 2004

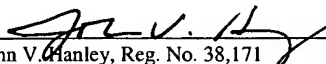
For: BIFURCATED MULTICAPSULE  
INTRALUMINAL GRAFTING SYSTEM  
AND METHOD

Date: May 5, 2004

Examiner: TBD

Group Art Unit: 3731

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Office of Initial Patent Examination's Filing Receipt Corrections, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on May 5, 2004.

  
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REQUEST FOR CORRECTED FILING RECEIPT

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Applicant is in receipt of the original Filing Receipt (copy enclosed) for the above-identified application.

Applicant notes that the continuing data should reflect the following:

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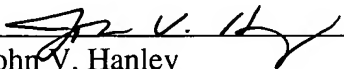
THIS APPLN IS A CON OF	10/025,168	12/18/01	PAT 6,682,557
WHICH IS A CON OF	09/263,047	03/05/99	PAT 6,355,061
WHICH IS A CON OF	09/097,538	06/15/98	PAT 6,322,587
WHICH IS A DIV OF	08/698,788	08/16/96	ABN
WHICH IS A DIV OF	08/241,476	05/12/94	PAT 5,628,783
WHICH IS A CIP OF	09/877,799	06/05/01	PAT 6,395,022
WHICH IS A CON OF	09/420,931	10/19/99	PAT 6,241,759
WHICH IS A CON OF	08/742,311	11/01/96	PAT 6,132,459

WHICH IS A CON OF	08/166,069	12/10/93	PAT 5,609,625
WHICH IS A CON OF	08/066,414	05/21/93	PAT 5,489,295
WHICH IS A CON OF	07/684,018	04/11/91	ABN

Please correct your records in the Patent Office and issue a corrected copy of the Filing Receipt.

Respectfully submitted,

FULWIDER PATTON LEE & UTECHT, LLP

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APPL NO.	FILING OR 371 (c) DATE	ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
10/764,050	01/23/2004	3731	770	ENDOV-67115	14	13	1

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CONFIRMATION NO. 7611

**FILING RECEIPT**



\*OC000000012487746\*

Date Mailed: 04/29/2004

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Filing Receipt Corrections, facsimile number 703-746-9195. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

**Applicant(s)**

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**Domestic Priority data as claimed by applicant**

This application is a CON of 10/025,168 12/18/2001 PAT 6,682,557  
which is a CON of 09/263,047 03/05/1999 PAT 6,355,061  
which is a CON of 09/097,538 06/15/1998 PAT 6,322,587  
which is a DIV of 08/698,788 08/16/1996 ABN  
which is a DIV of 08/241,476 05/12/1994 PAT 5,628,783

**Foreign Applications**

If Required, Foreign Filing License Granted: 04/29/2004

Projected Publication Date: 08/05/2004

Non-Publication Request: No

Early Publication Request: No



Title

Bifurcated multicapsule intraluminal grafting system and method

Preliminary Class

623

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